

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

|   |  |   |  |  |  |
|---|--|---|--|--|--|
| <b>The C/OH Instruction Guide explains how to complete this form.</b>                               |  | <b>1 Filer ID</b><br>(Ethics Commission Filers)<br>00088188 | <b>2 Total pages filed:</b><br>17  |  |  |
| <b>3 CANDIDATE / OFFICEHOLDER NAME</b>  | MS / MRS / MR<br>Mrs.  | FIRST<br>Rachel L.  | MI   | <b>OFFICE USE ONLY</b><br><hr/> Date Received<br><b>ELECTRONICALLY FILED</b><br>10/28/2024 |  |
|   | NICKNAME   | LAST<br>Mello   | SUFFIX   |  |  |
| <b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b><br><br><input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY;<br>2600 Chamberlain Dr.<br><br>Plano, TX 75023  |   | ZIP CODE   | Date Hand-delivered or Date Postmarked   |  |
|   |  |   |  | Receipt #      Amount  |  |
|   |  |   |  | Date Processed   |  |
|   |  |   |  | Date Imaged  |  |
| <b>5 CAMPAIGN TREASURER NAME</b>  | MS / MRS / MR<br>Ms.   | FIRST<br>Jada   | MI   |  |  |
|   | NICKNAME   | LAST<br>Bryant  | SUFFIX   |  |  |
| <b>6 CAMPAIGN TREASURER ADDRESS</b><br><br>(Residence or Business)                                  | STREET ADDRESS (NO PO BOX PLEASE);<br>1843 Valencia Dr.<br><br>Allen, TX 75013   |   | APT / SUITE #;   | CITY;      STATE;      ZIP CODE  |  |
|   |  |   |  |  |  |
| <b>7 CAMPAIGN TREASURER PHONE</b>   | AREA CODE<br>(318)   | PHONE NUMBER<br>286-4071                                    | EXTENSION  |  |  |
| <b>8 REPORT TYPE</b>  | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) |   |  |  |  |
|   | <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)   |   |  |  |  |
| <b>9 PERIOD COVERED</b>   | Month    Day    Year<br>09/27/2024   | THROUGH   | Month    Day    Year<br>10/26/2024   |  |  |
| <b>10 ELECTION</b>  | ELECTION DATE<br>Month    Day    Year<br>11/05/2024  |   | ELECTION TYPE<br><input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other<br><input checked="" type="checkbox"/> General <input type="checkbox"/> Special |  |  |
|   |  |   |  |  |  |
| <b>11 OFFICE</b>  | OFFICE HELD (if any)   |   | <b>12 OFFICE SOUGHT (if known)</b><br>State Senator District 8   |  |  |

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

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|   |   |
|---|---|
| <b>13 C / OH NAME</b> Mello, Rachel L. (Mrs.) | <b>14 Filer ID</b> (Ethics Commission Filers)<br>00088188 |
|---|---|

|  |  |  |
|--|--|--|
| <b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b><br><br><input checked="" type="checkbox"/> Additional Pages | This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. |  |
|  | <b>COMMITTEE TYPE</b><br><br><input checked="" type="checkbox"/> GENERAL<br><br><input type="checkbox"/> SPECIFIC  | <b>COMMITTEE NAME</b><br>Blue Horizon Texas PAC                        |
|  |  | <b>COMMITTEE ADDRESS</b><br>PO Box 780162<br><br>San Antonio, TX 78278 |
|  |  | <b>COMMITTEE CAMPAIGN TREASURER NAME</b><br>Barnett, Claire            |
|  |  | <b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b><br><br>TX                  |

|                                |   |             |
|--------------------------------|---|-------------|
| <b>16 CONTRIBUTION TOTALS</b>  | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ 0.00     |
|                                | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  | \$ 4,163.92 |
| <b>EXPENDITURE TOTALS</b>      | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES  | \$ 0.00     |
|                                | 4. TOTAL POLITICAL EXPENDITURES   | \$ 3,698.75 |
| <b>CONTRIBUTION BALANCE</b>    | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD  | \$ 1,982.36 |
| <b>OUTSTANDING LOAN TOTALS</b> | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD   | \$ 4,767.67 |

**17 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mrs. Rachel L. Mello  
\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

---

Signature of officer administering      Printed name of officer administering      Title of officer administering oath

# CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

FORM C/OH  
ADDENDUM

Page 3 of 17

|             |                         |          |                            |
|-------------|-------------------------|----------|----------------------------|
| C / OH NAME | Mello, Rachel L. (Mrs.) | Filer ID | (Ethics Commission Filers) |
|             |                         | 00088188 |                            |

|                                       |   |                      |  |
|---------------------------------------|---|----------------------|--|
| 17 NOTICE FROM POLITICAL COMMITTEE(S) | .. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures .. |                      |  |
|                                       | COMMITTEE TYPE  | COMMITTEE NAME       |  |
|                                       | <input checked="" type="checkbox"/> GENERAL   | Plano Area Democrats |  |
|                                       | <input type="checkbox"/> SPECIFIC   | COMMITTEE ADDRESS    |  |
|                                       |   | PO Box 251373        |  |
|                                       |   | Plano, TX 75025      |  |
|                                       | COMMITTEE CAMPAIGN TREASURER NAME   |                      |  |
|                                       | Barrett, Irvin  |                      |  |
|                                       | COMMITTEE CAMPAIGN TREASURER ADDRESS  |                      |  |
|                                       | 1119 Shadow Lakes Blvd  |                      |  |
|                                       | Allen, TX 75002   |                      |  |

**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3**

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|   |   |
|---|---|
| <b>18 FILER NAME</b><br>Mello, Rachel L. (Mrs.) | <b>19 Filer ID</b> (Ethics Commission Filers)<br>00088188 |
|---|---|

| <b>20 SCHEDULE SUBTOTALS</b> |   | <b>SUBTOTAL AMOUNT</b> |
|------------------------------|---|------------------------|
| <b>NAME OF SCHEDULE</b>      |   |                        |
| 1.                           | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                           | \$ 3,014.00            |
| 2.                           | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS             | \$ 1,149.92            |
| 3.                           | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS  | \$                     |
| 4.                           | <input checked="" type="checkbox"/> SCHEDULE E: LOANS   | \$ 500.00              |
| 5.                           | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS        | \$ 3,698.75            |
| 6.                           | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS   | \$                     |
| 7.                           | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS                  | \$                     |
| 8.                           | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                      | \$                     |
| 9.                           | <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS                             | \$                     |
| 10.                          | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH             | \$                     |
| 11.                          | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                | \$                     |
| 12.                          | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$                     |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |  |
|--|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>               |   | <b>1</b> Total pages Schedule A1:<br>Sch: 1/6 Rpt: 5/17  |
| <b>2</b> FILER NAME<br>Mello, Rachel L. (Mrs.)                                 |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00088188 |
| <b>4</b> Date<br>09/27/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Afful, John<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Fairview, TX 75069 | <b>7</b> Amount of Contribution (\$)<br><br>\$20.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed   |   | <b>9</b> Employer (See Instructions)<br>Not Employed     |
| Date<br>10/16/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Attebery, Ashlee<br><hr/> Contributor address; City; State; Zip Code<br><br>Allen, TX 75002                 | Amount of Contribution (\$)<br><br>\$75.00               |
| Principal occupation / Job title (See Instructions)<br>Director of Web Support |   | Employer (See Instructions)<br>QTI                       |
| Date<br>10/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Bowden, Mike<br><hr/> Contributor address; City; State; Zip Code<br><br>Richardson, TX 75080                | Amount of Contribution (\$)<br><br>\$50.00               |
| Principal occupation / Job title (See Instructions)<br>Fraud Analyst           |   | Employer (See Instructions)<br>JP Morgan Chase           |
| Date<br>10/17/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Donaghey, Tanya<br><hr/> Contributor address; City; State; Zip Code<br><br>Allen, TX 75002                  | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>Education               |   | Employer (See Instructions)<br>Collin College            |
| Date<br>10/23/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Evans, Darrel<br><hr/> Contributor address; City; State; Zip Code<br><br>McKinney, TX 75069                 | Amount of Contribution (\$)<br><br>\$35.00               |
| Principal occupation / Job title (See Instructions)<br>Sales                   |   | Employer (See Instructions)<br>Volie                     |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |  |  |
|---|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>                  |  | <b>1</b> Total pages Schedule A1:<br>Sch: 2/6 Rpt: 6/17  |
| <b>2</b> FILER NAME<br>Mello, Rachel L. (Mrs.)                                    |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00088188 |
| <b>4</b> Date<br>10/25/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Fallier, Bryan<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Dallas, TX 75204 | <b>7</b> Amount of Contribution (\$)<br><br>\$10.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Software Engineer |  | <b>9</b> Employer (See Instructions)<br>AT&T             |
| Date<br>10/18/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Fickling, Sarah<br><hr/> Contributor address; City; State; Zip Code<br><br>McKinney, TX 75070                | Amount of Contribution (\$)<br><br>\$6.00                |
| Principal occupation / Job title (See Instructions)<br>Not Employed               |  | Employer (See Instructions)<br>Not Employed              |
| Date<br>10/10/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Groen, Macey<br><hr/> Contributor address; City; State; Zip Code<br><br>Plano, TX 75023                      | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>HR Manager                 |  | Employer (See Instructions)<br>TI                        |
| Date<br>10/19/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hulla, Connor<br><hr/> Contributor address; City; State; Zip Code<br><br>Wylie, TX 75098                     | Amount of Contribution (\$)<br><br>\$50.00               |
| Principal occupation / Job title (See Instructions)<br>Not Employed               |  | Employer (See Instructions)<br>Not Employed              |
| Date<br>10/12/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hunt County Democratic Party<br><hr/> Contributor address; City; State; Zip Code<br><br>Greenville, TX 75403 | Amount of Contribution (\$)<br><br>\$2,000.00            |
| Principal occupation / Job title (See Instructions)                               |  | Employer (See Instructions)                              |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |  |  |
|--|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>             |  | <b>1</b> Total pages Schedule A1:<br>Sch: 3/6 Rpt: 7/17  |
| <b>2</b> FILER NAME<br>Mello, Rachel L. (Mrs.)                               |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00088188 |
| <b>4</b> Date<br>10/23/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>King, Melinda<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Minneapolis, MN 55415 | <b>7</b> Amount of Contribution (\$)<br><br>\$40.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |  | <b>9</b> Employer (See Instructions)<br>Not Employed     |
| Date<br>09/29/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Klinger, Marie<br><hr/> Contributor address; City; State; Zip Code<br><br>Allen, TX 75002                        | Amount of Contribution (\$)<br><br>\$6.00                |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |  | Employer (See Instructions)<br>Not Employed              |
| Date<br>10/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Lemmond, Byron<br><hr/> Contributor address; City; State; Zip Code<br><br>Katy, TX 77449                         | Amount of Contribution (\$)<br><br>\$7.00                |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |  | Employer (See Instructions)<br>Not Employed              |
| Date<br>10/20/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Matherne, Derek<br><hr/> Contributor address; City; State; Zip Code<br><br>Richardson, TX 75080                  | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>GIS Analyst           |  | Employer (See Instructions)<br>Motion LLC                |
| Date<br>10/11/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>McCormick, James<br><hr/> Contributor address; City; State; Zip Code<br><br>Plano, TX 75074                      | Amount of Contribution (\$)<br><br>\$10.00               |
| Principal occupation / Job title (See Instructions)<br>Software Engineer     |  | Employer (See Instructions)<br>USAA                      |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |   |
|--|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>               |   | <b>1</b> Total pages Schedule A1:<br>Sch: 4/6 Rpt: 8/17           |
| <b>2</b> FILER NAME<br>Mello, Rachel L. (Mrs.)                                 |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00088188          |
| <b>4</b> Date<br>10/22/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Michel, Liz<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>McKinney, TX 75070                                       | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00               |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed   |   | <b>9</b> Employer (See Instructions)<br>None                      |
| Date<br>10/16/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Millar, Ron<br><hr/> Contributor address; City; State; Zip Code<br><br>Arlington, VA 22201  | Amount of Contribution (\$)<br><br>\$25.00                        |
| Principal occupation / Job title (See Instructions)<br>Political & PAC Manager |   | Employer (See Instructions)<br>Center for Freethought Equality US |
| Date<br>10/23/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Moralez, Lisa<br><hr/> Contributor address; City; State; Zip Code<br><br>Allen, TX 75002  | Amount of Contribution (\$)<br><br>\$40.00                        |
| Principal occupation / Job title (See Instructions)<br>Business Manager        |   | Employer (See Instructions)<br>Siemens Government Technologies    |
| Date<br>10/11/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>National Association of Social Workers Political Action for Candidate<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701 | Amount of Contribution (\$)<br><br>\$100.00                       |
| Principal occupation / Job title (See Instructions)                            |   | Employer (See Instructions)                                       |
| Date<br>10/15/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Nieman, Bobby<br><hr/> Contributor address; City; State; Zip Code<br><br>Quinlan, TX 75474  | Amount of Contribution (\$)<br><br>\$25.00                        |
| Principal occupation / Job title (See Instructions)<br>Not Employed            |   | Employer (See Instructions)<br>Not Employed                       |



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |   |
|--|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>                 |   | <b>1</b> Total pages Schedule A1:<br>Sch: 5/6 Rpt: 9/17     |
| <b>2</b> FILER NAME<br>Mello, Rachel L. (Mrs.)                                   |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00088188    |
| <b>4</b> Date<br>10/10/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Obets, Russell<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Plano, TX 75075 | <b>7</b> Amount of Contribution (\$)<br><br>\$100.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Support Engineer |   | <b>9</b> Employer (See Instructions)<br>Amazon Web Services |
| Date<br>10/05/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Owsley, James<br><hr/> Contributor address; City; State; Zip Code<br><br>Greenville, TX 75402               | Amount of Contribution (\$)<br><br>\$15.00                  |
| Principal occupation / Job title (See Instructions)<br>Adjunct                   |   | Employer (See Instructions)<br>Paris Junior College         |
| Date<br>10/17/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Owsley, James<br><hr/> Contributor address; City; State; Zip Code<br><br>Greenville, TX 75402               | Amount of Contribution (\$)<br><br>\$40.00                  |
| Principal occupation / Job title (See Instructions)<br>Adjunct                   |   | Employer (See Instructions)<br>Paris Junior College         |
| Date<br>10/21/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Sharpless, Carlson<br><hr/> Contributor address; City; State; Zip Code<br><br>Dallas, TX 75243              | Amount of Contribution (\$)<br><br>\$50.00                  |
| Principal occupation / Job title (See Instructions)<br>IT Development Program    |   | Employer (See Instructions)<br>Texas Instruments, Inc       |
| Date<br>10/23/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Sutka, Jeremy<br><hr/> Contributor address; City; State; Zip Code<br><br>McKinney, TX 75070                 | Amount of Contribution (\$)<br><br>\$115.00                 |
| Principal occupation / Job title (See Instructions)<br>CEO                       |   | Employer (See Instructions)<br>KJMB Solutions               |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>              |   | <b>1</b> Total pages Schedule A1:<br>Sch: 6/6 Rpt: 10/17 |
| <b>2</b> FILER NAME<br>Mello, Rachel L. (Mrs.)                                |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00088188 |
| <b>4</b> Date<br>09/27/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Welch, Juley | <b>7</b> Amount of Contribution (\$)<br><br>\$20.00      |
| <b>6</b> Contributor address; City; State; Zip Code<br><br>Fairview, TX 75069 |   |  |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed  |   | <b>9</b> Employer (See Instructions)<br>Not Employed     |
| Date<br>10/08/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>White, Stevan         | Amount of Contribution (\$)<br><br>\$50.00               |
| Contributor address; City; State; Zip Code<br><br>San Angelo, TX 76903        |   |  |
| Principal occupation / Job title (See Instructions)<br>Not Employed           |   | Employer (See Instructions)<br>Not Employed              |
| Date<br>10/11/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Williams, Elizabeth   | Amount of Contribution (\$)<br><br>\$25.00               |
| Contributor address; City; State; Zip Code<br><br>Alamogordo, NM 88310        |   |  |
| Principal occupation / Job title (See Instructions)<br>Not Employed           |   | Employer (See Instructions)<br>Not Employed              |

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

|  |  |   |   |
|--|--|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>                     |  | 1 Total pages Schedule A2:<br>Sch: 1/2 Rpt: 11/17                               |   |
| 2 FILER NAME<br>Mello, Rachel L. (Mrs.)  |  | 3 Filer ID (Ethics Commission Filers)<br>00088188                               |   |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                                |  | \$  |   |
| 5 Date<br>10/23/2024   | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Mello, Rachel | 8 Amount of contribution (\$)<br>\$62.45  | 9 In-kind contribution description<br>Beverages |
|  | 7 Contributor address; City; State; Zip Code<br><br>Plano, TX 75023                                | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |   |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)<br>Teacher |  | 11 Employer (FOR NON-JUDICIAL) (See instructions)<br>Richardson ISD             |   |
| 12 Contributor's principal occupation (FOR JUDICIAL)                                 |  | 13 Contributor's job title (FOR JUDICIAL) (See instructions)                    |   |
| 14 Contributor's employer/law firm (FOR JUDICIAL)                                    |  | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)                     |   |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)          |  |   |   |
| Date<br>10/23/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Mello, Rachel   | Amount of contribution (\$)<br>\$77.51  | In-kind contribution description<br>Paper goods |
|  | Contributor address; City; State; Zip Code<br><br>Plano, TX 75023                                  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |   |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)<br>Teacher    |  | Employer (FOR NON-JUDICIAL) (See instructions)<br>Richardson ISD                |   |
| Contributor's principal occupation (FOR JUDICIAL)                                    |  | Contributor's job title (FOR JUDICIAL) (See instructions)                       |   |
| Contributor's employer/law firm (FOR JUDICIAL)                                       |  | Law firm of contributor's spouse (if any) (FOR JUDICIAL)                        |   |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)             |  |   |   |
| Date<br>10/23/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Mello, Rachel   | Amount of contribution (\$)<br>\$341.03   | In-kind contribution description<br>Event Food  |
|  | Contributor address; City; State; Zip Code<br><br>Plano, TX 75023                                  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |   |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)<br>Teacher    |  | Employer (FOR NON-JUDICIAL) (See instructions)<br>Richardson ISD                |   |
| Contributor's principal occupation (FOR JUDICIAL)                                    |  | Contributor's job title (FOR JUDICIAL) (See instructions)                       |   |
| Contributor's employer/law firm (FOR JUDICIAL)                                       |  | Law firm of contributor's spouse (if any) (FOR JUDICIAL)                        |   |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)             |  |   |   |

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

|  |   |   |  |
|--|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>                           |   | 1 Total pages Schedule A2:<br>Sch: 2/2 Rpt: 12/17                               |  |
| 2 FILER NAME<br>Mello, Rachel L. (Mrs.)  |   | 3 Filer ID (Ethics Commission Filers)<br>00088188                               |  |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                                      |   | \$  |  |
| 5 Date<br>10/23/2024   | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Mello, Rachel    | 8 Amount of contribution (\$)<br>\$143.93                                       | 9 In-kind contribution description<br>Event Food   |
|  | 7 Contributor address; City; State; Zip Code<br><br>Plano, TX 75023                                   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |  |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)<br>Teacher       |   | 11 Employer (FOR NON-JUDICIAL) (See instructions)<br>Richardson ISD             |  |
| 12 Contributor's principal occupation (FOR JUDICIAL)                                       |   | 13 Contributor's job title (FOR JUDICIAL) (See instructions)                    |  |
| 14 Contributor's employer/law firm (FOR JUDICIAL)  |   | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)                     |  |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)                |   |   |  |
| Date<br>10/14/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Pierce, Kiana      | Amount of contribution (\$)<br>\$275.00   | In-kind contribution description<br>Headshots      |
|  | Contributor address; City; State; Zip Code<br><br>Dallas, TX 75219                                    | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |  |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)<br>Photographer     |   | Employer (FOR NON-JUDICIAL) (See instructions)<br>P-Media, LLC                  |  |
| Contributor's principal occupation (FOR JUDICIAL)  |   | Contributor's job title (FOR JUDICIAL) (See instructions)                       |  |
| Contributor's employer/law firm (FOR JUDICIAL)   |   | Law firm of contributor's spouse (if any) (FOR JUDICIAL)                        |  |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)                   |   |   |  |
| Date<br>10/23/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Washington, Makala | Amount of contribution (\$)<br>\$250.00   | In-kind contribution description<br>Event planning |
|  | Contributor address; City; State; Zip Code<br><br>Fairview, TX 75069                                  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |  |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)<br>Event Consultant |   | Employer (FOR NON-JUDICIAL) (See instructions)<br>Personality on the Rocks      |  |
| Contributor's principal occupation (FOR JUDICIAL)  |   | Contributor's job title (FOR JUDICIAL) (See instructions)                       |  |
| Contributor's employer/law firm (FOR JUDICIAL)   |   | Law firm of contributor's spouse (if any) (FOR JUDICIAL)                        |  |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)                   |   |   |  |

# LOANS

# SCHEDULE E

|   |   |   |
|---|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>                          |   | <b>1</b> Total pages Schedule E:<br>Sch: 1/1 Rpt: 13/17   |
| <b>2</b> FILER NAME<br>Mello, Rachel L. (Mrs.)  |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00088188  |
| <b>4</b> TOTAL OF UNITEMIZED LOANS  |   | <b>\$</b>   |
| <b>5</b> Date of loan<br>10/15/2024   | <b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Mello, Rachel | <b>9</b> Loan Amount (\$)<br>\$500.00   |
| <b>6</b> Is lender a financial institution?<br>No   | <b>8</b> Lender address; City; State; Zip Code<br><br>Plano, TX 75023                           | <b>10</b> Interest Rate   |
|   |   | <b>11</b> Maturity Date   |
| <b>12</b> Principal occupation / Job title (See Instructions)<br>Teacher                  |   | <b>13</b> Employer (See Instructions)<br>Richardson ISD   |
| <b>14</b> Description of Collateral<br><input checked="" type="checkbox"/> None           |   | <b>15</b> Check if personal funds were deposited into political account (See Instructions)<br><input checked="" type="checkbox"/> |
| <b>16</b> GUARANTOR INFORMATION<br><br><input checked="" type="checkbox"/> not applicable | <b>17</b> Name of guarantor   | <b>19</b> Amount Guaranteed (\$)  |
|   | <b>18</b> Guarantor address; City; State; Zip Code  |   |
| <b>20</b> Principal occupation  |   | <b>21</b> Employer (See Instructions)   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|  |  |   |
|--|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 1/4 Rpt: 14/17     | <b>2</b> FILER NAME<br>Mello, Rachel L. (Mrs.)   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00088188  |
| <b>4</b> Date<br>09/29/2024                                  | <b>5</b> Payee name<br>ActBlue Technical Services  |   |
| <b>6</b> Amount (\$)<br>\$18.81                              | <b>7</b> Payee address; City; State; Zip Code<br>366 Summer Street<br><br>Somerville, MA 02144 |   |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees                | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Service Fee |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>10/06/2024   | Payee name<br>ActBlue Technical Services   |   |
| Amount (\$)<br>\$2.86  | Payee address; City; State; Zip Code<br>366 Summer Street<br><br>Somerville, MA 02144          |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees                | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Service Fee |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>10/13/2024   | Payee name<br>ActBlue Technical Services   |   |
| Amount (\$)<br>\$8.31  | Payee address; City; State; Zip Code<br>366 Summer Street<br><br>Somerville, MA 02144          |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees                | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Service Fee |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |  |   |
|---|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 2/4 Rpt: 15/17            | <b>2</b> FILER NAME<br>Mello, Rachel L. (Mrs.)   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00088188  |
| <b>4</b> Date<br>10/20/2024   | <b>5</b> Payee name<br>ActBlue Technical Services  |   |
| <b>6</b> Amount (\$)<br>\$10.73                                     | <b>7</b> Payee address; City; State; Zip Code<br>366 Summer Street<br><br>Somerville, MA 02144 |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees                | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Service Fee     |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought                      Office held  |
| Date<br>10/02/2024  | Payee name<br>Blue Horizon Texas PAC   |   |
| Amount (\$)<br>\$250.00   | Payee address; City; State; Zip Code<br>PO Box 780162<br><br>San Antonio, TX 78278             |   |
| <b>PURPOSE OF EXPENDITURE</b>                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>GOTV Support    |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought                      Office held  |
| Date<br>10/15/2024  | Payee name<br>Dollar Tree  |   |
| Amount (\$)<br>\$23.00  | Payee address; City; State; Zip Code<br>2109 W Parker Road, Ste B<br><br>Plano, TX 75023       |   |
| <b>PURPOSE OF EXPENDITURE</b>                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Supplies     | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Office Supplies |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought                      Office held  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |   |  |
|---|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 3/4 Rpt: 16/17            | <b>2</b> FILER NAME<br>Mello, Rachel L. (Mrs.)  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00088188   |
| <b>4</b> Date<br>10/15/2024   | <b>5</b> Payee name<br>Frost  |  |
| <b>6</b> Amount (\$)<br>\$2.00                                      | <b>7</b> Payee address; City; State; Zip Code<br>PO Box 16509<br><br>Fort Worth, TX 76162     |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees               | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Service Fee          |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>10/01/2024  | Payee name<br>Google  |  |
| Amount (\$)<br>\$12.79  | Payee address; City; State; Zip Code<br>1600 Amphitheatre Pkwy<br><br>Mountain View, CA 94043 |  |
| <b>PURPOSE OF EXPENDITURE</b>                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees               | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Service Fees         |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>10/02/2024  | Payee name<br>NGP VAN   |  |
| Amount (\$)<br>\$159.90   | Payee address; City; State; Zip Code<br>655 15th St NW, Suite 650<br><br>Washington, DC 20005 |  |
| <b>PURPOSE OF EXPENDITURE</b>                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees               | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Volunteer Management |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|  |  |   |
|--|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 4/4 Rpt: 17/17     | <b>2</b> FILER NAME<br>Mello, Rachel L. (Mrs.)   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00088188  |
| <b>4</b> Date<br>10/23/2024                                  | <b>5</b> Payee name<br>Poppy's Wings   |   |
| <b>6</b> Amount (\$)<br>\$140.00                             | <b>7</b> Payee address; City; State; Zip Code<br>163 Fountain Ct<br><br>Fairview, TX 75069 |   |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Food expense    |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>10/24/2024   | Payee name<br>Staples  |   |
| Amount (\$)<br>\$70.35                                       | Payee address; City; State; Zip Code<br>812 W McDermott Dr<br><br>Allen, TX 75013          |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Supplies | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Office Supplies |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>10/15/2024   | Payee name<br>Taylor, Trey   |   |
| Amount (\$)<br>\$3,000.00                                    | Payee address; City; State; Zip Code<br>26 Irene Court<br><br>Broomfield, CO 80020         |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Vendor fees     |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |